## JEFFERSON COUNTY PLANNING DEPARTMENT



. 445 W. PALMER MILL ROAD - MONTICELLO, FLORIDA 32345 Phone (850) 342-0223 - Fax: (850) 342-0225

TEMPORARY USE PERMIT		
Owner's Name(s):		
Parcel ID Number(s):		
Phone Number: Fa		
Mailing Address:		
Proof of Ownership (attach a copy of the de		
Physical (911) Address of Property:	•	
Land Use Designation:		
Proposed Temporary Use/Activities:		
Date(s) of Proposed Activity:	Hours o	of Operation:
handled and provide confirmation by copy of	of letter/statement	answer yes or no; if yes, explain how it will be of agreement, copy of license (if required), etc.
A. Security and/or Traffic Control: Availal	ble?: Method	l:
B. Health/Sanitation Provisions:		
•		
		/License?:
d. Alcoholic Beverages: Available?:	Sales?:	Provider/License?
C. Explain any Special provisions regarding	g control of Sound	and/or Light during the activities:
D. Proof of \$1,000,000 Liability Insurance E. Additional Provisions:		event:
Acknowledgment:		
subsequent events to occur at the above lo	ocation will be req	r a one-time event on the date(s) listed and al uired to submit a new temporary use permit in the (LDC) for each individual event (limited to six
Owner	Date	
Owner	Date	<del></del>
Owner  I have reviewed this application and determi Jefferson County LDC and otherwise compl	1 1	osed temporary use meets the conditions of the ble laws and ordinances.
Planning & Zoning Official Conditions of Approval::		Date